

FILED UNDER 35 U.S.C. § 100 371

*Handwritten initials/signature*

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		6	5-2-98
FORMALITY REVIEW	9/21		7-8-98

INDEX OF CLAIMS

- ✓ ..... Rejected
- ..... Allowed
- ..... (Through numeral) Canceled
- ..... Restricted
- N ..... Non-elected
- I ..... Interference
- A ..... Appeal
- O ..... Objected

Claim	Final	Original	Date
1	✓	✓	11/12/98
2	✓	✓	11/12/98
3	✓	✓	11/12/98
4	✓	✓	11/12/98
5	✓	✓	11/12/98
6	✓	✓	11/12/98
7	✓	✓	11/12/98
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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